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								OP Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOF								) I		-011	701	1660	
					091	140							
OLAIMO AC EILED DADT!													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL	EN	TITY		OTHER	
TC	TAL CLAIMS		COMMIN	''	(Column 2)			TYPE			OR	SMALL	ENTITY
TOTAL CLASIVIS								RATE		FEE		RATE	FEE
FOR			· NUMBER FILED		NUMBER EXTRA			BASIC FEE		355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	, minus 20=		•			X\$ 9=			OR	X\$18=	
IND	EPENDENT CL	AIMS	minus 3 =		•			X40=			OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+135=			OR	+270=		
• If	the difference	in column 1 is	ess than zero, enter "0" in			olumn 2		TOTAL	4		OR	TOTAL	710,0
OLAIMO AO AMENDED DADEU								10171	L				
CLAIMS AS AMENDED - PART II								SMAL	ı EI	VTITV	OR	OTHER SMALL	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								CIVIAL			U., I 1	OMALL	
TA	150	REMAINING AFTER		NUM PREVIO		PRESENT	П	RATE	-	ADDI- TONAL		RATE	ADDI- TIONAL
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								十	-/-	0		/
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(Column 1) (Column 2) (Column 3)												ADDIT: 7 CC;	
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ك	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	CLAIM		1	7,400			OR	7,002		
BEST AVAILA'								+135=			OR	+270=	
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		(Column 1)		(Colur	nn 21	(Column 3)						ADDIT: 1 CE	
		CLAIMS		HIGH	EST	(Colonia 3)	1 г			4001	1		4881
2		REMAINING AFTER	0	NUM		PRESENT EXTRA		RATE		ADDI- IONAL		RATE	ADDI- TIONAL
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AMENDMENT C	Total	•	Minus	••		=		X\$ 9=			OR	X\$18=	
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[	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		1 L	X40=	4		OR	X80=	
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* #1	I the entry in colu: I the "Highest Nur	nn 1 is less than th nber Previously Pa	e entry in colur	nn 2, write	o on col	umn 3. n 20. enter "20		TOTA			OR	TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR ADDIT. FEE  ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number lound in the appropriate box in column 1.													
1	ine mignest Num	per Previously Pai	orof (lotal or	Independi	ent) is the	nighest numbe	er fou	nd in the a	appro	priate box	in cot	umn 1.	